# ANALYSIS OF MEDICAL RECORDS PERSONNEL NEEDS USING THE ABK KES METHOD

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#### ABSTRACT

Burden Work type as much work as possible Possible must be resolved by a power Work health professional in One year there service health Based on studies introduction at the Community Health Cente Waborobo there are 4 officers consisting of 1 civil servant backgroun behind D3 Nursing education, and 3 internships with backgroun behind education 1 person D4 record medical, 1 person S1 publi health and 1 D3 nursing person with total patient visits on in 2023 will be 2,368. lack power record medical cause No orderl administration because Still obtained officer concurrently work others like officer registration concurrently as officer screening An distribution as well as officer concurrently filing as office registration. So that causes burden Work from officers more Lots . Th aim of the research was to determine the need for medical record personnel at the Waborobo Community Health Center using the Healt. Workload Analysis (ABK Kes) method. This research applies qualitative descriptive approach with a case study design. The object of the research is calculating the need for medical record personne using the ABK Kes method. Data was collected through observation interviews and documentation studies. The results of the research reveal that based on the calculations of the Kes crew, the availabl working time reaches 1,300 hours per year or 78,000 minutes per yea in accordance with the lowest workload standard, namely distribution of 165,957, the standard of supporting tasks is 1.01 and the results c calculations according to the Kes crew's method show the need fo manpower. medical records of 4 people. Waborobo Community Healt Center already has 4 medical records officers, but there are severa officers who do not meet the qualifications in accordance wit applicable regulations.

#### INTRODUCTION

Community Health Centers (Puskesmas) are health service institutions that provide first-level health services to communities and individuals. The main focus of the Community Health Center is on promotive and preventive activities, namely efforts to improve health and prevent disease, within the limits of its authority. (Minister of Health Regulation No. 43 of 2019). Community health centers play a crucial role in improving the overall health of the community. To achieve this goal, the Community Health Center must provide high-quality health services, including ensuring patient satisfaction with the services provided. One of the important aspects of the services provided by the Community Health Center is medical record management, which is an important part of the health support services they offer. This medical record management aims to ensure that patient health data is managed properly, which supports the process of diagnosis, treatment, and overall health evaluation. (Suhenda et al., 2022).

Medical records are documents that include complete details regarding patient identity, examination results, treatments, operations, and a series of other services provided to patients. Electronic medical records are digital representations of medical records created through a special electronic system for documentation purposes. Electronic medical records function as an important component of the health information system, functioning as an information subsystem in health institutions and directly interacting with other information subsystems in the institution (Minister of Health Regulation No. 24, 2022).

Workload indicates the volume of tasks that must be completed by health professionals in one year at a health facility. Workload analysis is used as a tool to ensure human resource needs are aligned with job criteria. The findings of this study can serve as a benchmark for individuals or organizational units in carrying out tasks, including work completion time norms , work efficiency

metrics, workload standards, and work performance evaluations. Workload analysis is very important for structuring employees, improving operational procedures, and other managerial functions. Furthermore, the results of the analysis can improve work efficiency and become the basis for coaching, developing, and empowering state apparatus, both institutions, administration, and employees, as regulated in the Regulation of the Minister of Health in 2012.

Based on previous research conducted by (Suhenda et al., 2022), Cihideung Health Center lacked personnel with a medical records education background in February 2021. Therefore, medical records service activities were carried out by nurses and general functional personnel. Although the number of registration officers was in accordance with the calculation results, there was a shortage of existing officers. Currently, they do not have a medical records education background, even though the Cihideung Health Center needs officers with these qualifications to ensure the orderly implementation of medical records services.

The results of the initial study conducted at the Waborobo Health Center through interviews with medical record officers showed that the Health Center had four staff, namely one civil servant with a D3 Nursing qualification and three interns , consisting of one person with a D4 Medical Records qualification, one person with a S1 Public Health qualification, and one person with a D3 Nursing qualification, with a total of 2,368 patients visited in 2023. The absence of medical record personnel resulted in disorderly administration , because several officers were required to carry out dual roles, such as being a registration officer while carrying out screening and distribution tasks, and filling in for officers who also served as registration officers.

#### **METHODOLOGY**

This study uses a qualitative descriptive methodology with a case study design to examine in depth the conditions or frequency of occurrence of demands on medical record officers using the ABK Kes method at the Waborobo Health Center. Research participants included medical records managers and medical records officers. This study aims to examine the needs of medical records officers using the ABK Kes method. The research was conducted in the registration section and medical records unit of Waborobo Health Center from April to July 2024. The data collection techniques used were observation, interviews, and document analysis. The tools and materials used in this study were Observation Checklist, Interview Guide, Documentation Checklist, research tables, calculators, stopwatches, and stationery.

### **RESULTS & DISCUSSION**

The health workload analysis approach measures needs based on the workload carried out by several categories of health workers in health facilities, adjusted for their main activities and responsibilities. The calculation of human resources for medical recorders at Waborobo Health Center using the Abk Kes technique consists of six parts, namely:

Determining Health Facilities and Types of SDMK

Health facilities are one type of public facility that is important for the community, with the main function of improving the health of the community (Yohan et al., 2022).

Table 1	l. Set Health	facilities	And	Type HRD

Health facilities	Unit Work	Type HRD	
Health Center	Record Medical	Recorder Medical	
Waborobo			

Based on the results of the research that has been conducted, the researcher utilized health service facilities at the Waborobo Health Center by using HRD medical record personnel of the medical record type, involving four medical record officers, namely one civil servant with a D3 Nursing education and three interns with various educational backgrounds, namely one person with a D4 Medical Record education, one person with a S1 Public Health education, and one person with a D3 Nursing education.

Based on the Regulation of the Minister of Administrative and Bureaucratic Reform of the Republic of Indonesia No. 30 of 2013 concerning the functional duties of medical recorders and their credit points, the staffing standard for medical record officers in health centers is set at seven people, consisting of five skilled workers and two expert workers .

## **Setting Available Working Hours**

Available working time is the time period used by health human resources to carry out their duties and activities within a period of one year (Irsani et al., 2022). The calculation of available working time is done by subtracting the working days in a year with annual leave, national holidays, training, and absences, then multiplying it by the number of daily working hours. The results of the study showed that the available working time of medical record officers in the medical record unit of the Waborobo Health Center was 1,300 hours per year or equivalent to 78,000 minutes per year. The results of this study are in line with the study (Widhiastuti et al., 2022) conducted at the Jatitiroto Wonogiri Health Center, which showed that the available working time of medical record officers was 1,200 hours per year or equivalent to 72,000 minutes per year.

**Table 2.** Set Time Work Available

No	Code A	Component B	Information C	Amount D	Unit E	
	A	Working days	5hrs/week	260 Day	Hr/yr	
	В	Employee Leave	12 days	12	Hr/yr	
	C	Holiday National	16 days	16	Hr/yr	
	D	Follow training	-	-	Hr/yr	
	E	Roll call (sick, etc.)	-	-	Hr/yr	
	F	Time Work in One Sunday	Presidential Decree No. 68/1995	37.5	Hours/mg	
	G	O'clock Work effective	Candy PAN-RB 26/2011	75% x 37.5 = 28.125	Hours/mg	
	WK	Working time (in 1 day)	5 days/mg	5.625	Hours/hr	
	WKT	Working time available (day)	5 days/mg	232	Hr/yr	
		Time work available (hours)	5 day/mg E1- (E3+E4+E5+E6)x E8	1.305	Hours/yr	
Time (in O		ailablerounded up		1,300	Hours/yr	
	Time Work available rounded up 78,000 (in minute)					

Source: Primary Data, 2024

## **Determination Of Workload Components And Time Norms**

The workload component relates to the exact tasks and job descriptions carried out by the designated Health HR category, which are in line with the established core tasks and functions. Meanwhile, the time norm is the length of time required by competent, talented, trained, and dedicated health HR to carry out an activity in accordance with the service standards set at the relevant health facility (Pardjono, 2017) . The time standard for the main task of the activity is determined through a stopwatch and interviews with medical record officers, while the time standard for additional tasks is

obtained from discussions with individuals responsible for medical records at the Waborobo Health Center.

Table 3. Component Workload and Time Norm

lo	Type Task	Activity	Norm Time
	Task Main Point	1. Registration Take care Road	
		a. New patient	6 minutes
		b. Old patient	4 minutes
		2. Filling	
		a. Retrieval BRM	0.66 minutes
		b. Return BRM	0.61 minutes
		Distribution	0.47 minutes
		Checklist RM return to poly	1.5 minutes
		Input data to pcare	3 minutes
		Input data to E-health center	3 minutes
		Recap report visit	120 minutes
	Task support	Meeting	180 minutes/quarter

Source: Data Primary, 2024

Research conducted in the medical records department of Waborobo Health Center revealed that medical records officers have an average workload of 6 minutes per new patient and 4 minutes per old patient. This includes 1 minute to pick up the BRM, 1 minute to return the BRM, 1.2 minutes for distribution, 1.5 minutes to pick up the RM checklist from the polyclinic, 3 minutes for data entry to Pcare, 3 minutes for data entry to the E-health center, and 120 minutes to summarize the visit report. The supporting job description for the Meeting requires an average of 720 minutes per year. Information regarding workload components and time standards was obtained from various job descriptions carried out by personnel in the Waborobo Health Center medical records unit.

### **Standard Workload Calculation**

The workload standard is a measure of the annual workload allocated to each group of Health Human Resources. The workload standard for main activities is formulated by considering the duration required to carry out each task based on the average time or time standard and the available working time that has been set (Irsani et al., 2022) .

Table 4. Standard Burden Work

78,000	13,000
,	13,000
70.000	
78,000	19,500
78,000	118,181
78,000	127,868
	78,000

Distribution				0.47 minutes	78,000	165,957
Checklist RM re	eturn to the	poly		1.5 minutes	78,000	52,000
Input data to Pca	are			3 minutes	78,000	26,000
Inputting Health Center	data	into	E-	3 minute	78,000	26,000
Recap Visit Rep	ort			120 minutes	78,000	650

Source: Data Primary, 2024

The results of the calculation of the Standard workload in the medical records section of the Waborobo Health Center show that the main tasks of the section include registering 13,000 new patients, 19,500 old patients, processing 78,200 BRMs, returning 78,000 BRMs, distributing 65,000 medical records, taking 52,000 RMs from the polyclinic, inputting data to Pcare 26,000, inputting data to the E-health center 26,000, and summarizing visit reports 650.

The calculation results show that the normative activities of registration time, filling in, checking polyclinic RM, input, distribution, and reporting are added up and divided by the Available Working Time (WKT) in accordance with the provisions of Permenpan No. 26 of 2011 which is a guideline for calculating the need for civil servants in the regions.

Based on previous research by (Nuraini & Hidayati, 2022), namely the average time spent by officers was 3.9 minutes/activity in the medical records unit, the average SBK at RSAU Lanud Sulaiman was obtained.

## **Calculating Supporting Task Standards and Supporting Task Factors**

Supporting Task Standard is a multiplication of the main tasks that must be done by HRD. Supporting Task Factor (FTP) is the ratio of time allocation to complete each task within a certain period of time (daily, weekly, monthly, or semesterly) (Cahyaningrum et al., 2020).

 Table 5. Standard Task Supporting and Factor Task Support

No	Task Type	activity	Flat- average time	Time activity (min/yr)	WKT (nmt/yr)	FTP %
	Task Supporting ng	meeting	180 min/t quarterly	720 minutes/ year	78,000	0.92
	or Task Suppor		TD/100\			
Stan	dard Task Sup	port = 1/(1 - F)				
			= 1/(0.9)	99)		
			= 1.01			

Source: Data Primary, 2024

Based on the results of the interview regarding the calculation of supporting tasks in the Medical Records Work Unit of Waborobo Health Center, there is one supporting task, namely a meeting held every quarter for 3 hours . This duration will be entered into the Available Working Time (WKT) and multiplied by 100%. Furthermore, STP will be calculated using the formula 1/(1-FTP/100). The calculation results at Waborobo Health Center showed findings of 0.65% and the Nursing Staff Standard (STP) of 1.01. This data will be used to determine the need for Human Resources (HR) at the final stage of the evaluation process.

## **Calculating HRD Needs**

Table 6. Human Resources Needs

No	Type Task	Activity	Achievements 1 year	SBK	Need HRD
	Task Main Point	Registration outpatient			
		a. patient new	2,368	13,000	0.1821538
		<ul><li>b. old patient</li><li>Filling</li></ul>	2,368	19,500	0.121436
		a. Withdrawal BRM	2,368	118,181	0.02020612 3
		b. Return BRM	2,368	127,868	0.01851895 3
		Distribution	2,368	165,957	0.01426875 6
		RM <i>Checklist</i> return to poly	2,368	52,000	0.04553846 2
		Input data to Pcare	2,368	26,000	0.09107692 3
		Input data to E- Health Center	2,368	26,000	0.09107692 3
		Summarize the report Visit	2,368	650	3.64307692 3
JKT =	= Amount Basic I	Manpower Requirements			4.22735286
	Task Support	Standard Task Support			1.01
Total	Need HRD (JKT	x STP) =		Rounding	4.26962633 4

Source: Data Primary, 2024

Assessment of staff needs in the medical records section of Waborobo Health Center using the Health Workload Analysis technique showed that some officers did not comply with laws and regulations. Waborobo Health Center currently employs four medical records officers. ABK Kes calculations show that four officers are needed to manage medical records in this health facility. Officers who meet the criteria listed in the Minister of Health Regulation No. 55 of 2013 concerning Management of Medical Records and Health Information will be more capable in managing medical record and health information tasks.

The results of this study are in line with previous research conducted by (M.Muzuh et al., 2023) which showed that a shortage of medical records personnel can lead to continuous filing errors and file duplication.

A person who has fulfilled the educational requirements for Medical Records and Health Information in accordance with statutory standards, and meets the criteria to occupy a position in the Waborobo Health Center medical records unit, even though he/she does not yet meet these criteria.

The functional position of medical recorders at the Health Center consists of seven people, consisting of two expert medical recorders and five skilled medical recorders, as regulated in the

Regulation of the Minister of State Apparatus Empowerment and Bureaucratic Reform No. 30 of 2013, concerning the Functional Position of Medical Recorders and their Credit Points, specifically in CHAPTER XI, Article 32, paragraph (1). The Waborobo Health Center employs one person who is trained in the field of medical records and health information management. However, the overall responsibilities of medical recorders at Waborobo Health Center indicate that the existing workload is not in line with the number of positions mandated by the ministerial regulation and does not match the required staffing levels.

According to Fadila (2019) emphasized that additional evaluation of health human resources is needed to ensure the number of staff needed and to monitor the efficiency of unit functions. Waborobo Health Center currently employs four people but has not met the requirements for medical record workers according to relevant regulations. The healthcare workload analysis approach indicated that the facility required four medical records staff.

#### **CONCLUSION**

The research conducted at Waborobo Health Center resulted in the following conclusions: the available working time in the medical records unit is 1,300 hours per year or equivalent to 78,000 minutes per year. Furthermore, an assessment was carried out on the components of the workload in the medical record officers, the most time-consuming is compiling a summary of the visit report with a standard time of 120 minutes, while the least time-consuming is distribution with a standard time of 0.47 minutes. The highest workload standard is 165,957, while the lowest workload standard is 650 minutes for compiling a summary of the visit report. The supporting task factor for medical record officers is 0.92 %, while the Supporting Task Standard is 1.01. The assessment of the need for medical record personnel is determined through a health workload analysis resulting in four people, while the Waborobo Health Center currently has four medical record officers. However, there are still many officers who do not meet the qualifications according to applicable provisions. The limitation of this study is that the rare number of new patients coming for treatment hampers the researcher's research.

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